CAMPAIGN TREASURE	R'S REPORT SUMMARY
(1) Isaiah Mosley	OFFICE USE ONLY
Name	RECSIVED
(2) 1038 11 Street #18	2015 OCT -9 PM <b>3: 4</b> 8
Address (number and street) Miami Beach, FL, 33139	CITY CLERK'S OFFICE
City, State, Zip Code	Off OLERN S STITUE
☐ Check here if address has changed	(3) ID Number:
(4) Check appropriate box(es):	
	h City Commissioner, Group 4
<ul><li>☐ Political Committee (PC)</li><li>☐ Electioneering Communications Org. (ECO)</li></ul>	☐ Check here if PC or ECO has disbanded
☐ Party Executive Committee (PTY)	☐ Check here if PTY has disbanded
Independent Expenditure (IE) (also covers an individual making electioneering communications)	Check here if no other IE or EC reports will be filed
	t Identifiers
Cover Period: From <u>09</u> / <u>01</u> / <u>15</u> To	10 / 02 / 15 Report Type: 2015-G1
☑ Original ☐ Amendment ☐ Sp	ecial Election Report
(6) Contributions This Report	(7) Expenditures This Report
<u> </u>	Monetary 1 020 00
Cash & Checks \$ , , ,00	Expenditures \$ , 1 , <u>020</u> . <u>00</u>
Loans \$ , ,	Transfers to
	Office Account \$ , ,
Total Monetary \$ , , _0 .00	1 000 00
·	Total Monetary \$ , 1 , <u>020</u> . <u>00</u>
In-Kind \$ , ,	(8) Other Distributions
	(8) Other Distributions \$ ,
(9) TOTAL Monetary Contributions To Date	(10) TOTAL Monetary Expenditures To Date
\$	\$ ,1 , _404 52
,	tification
	son to falsify a public record (ss. 839.13, F.S.)
I certify that I have examined this report and it is true, cor	i.
(Type name) Isaiah Mosley	(Type name) Isaiah Mosley
☐ Individual (only for IE ☐ Treasurer ☑ Deputy Treasurer or electioneering comm.)	☑ Candidate ☐ Chairperson (only for PC and PTY)
(x /m/w)	X / N/ /VV
Signature A442	Signature SEE DEVERSE FOR INSTRUCTION
DS-DE 12 (Rev. 11/13)	PSEE REVERSE FOR INSTRUCTIONS

## **CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS**

(1) Name	n Mostey	(2) I.D. Number					
(3) Cover Period	09 / 01 / 15	through 10 /	02 / 15	(4) Page	1 C	of	
(5) Date (6) Sequence	(7) Full Name (Last, Suffix, First, Middle) Street Address &	(8)	(9)	(10) In-kind	(11)	(12)	
Number	City, State, Zip Code	Type Occupation	Туре	Description	Amendment	Amoun	
1 1							
						-	
1 1							
1 1							
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1 1							
1 1							

DS-DE 13 (Rev. 11/13)

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Page Zof 3

1) Name <u>Isai</u>	CAMPAIGN TREASURER'S F		ZED EXPENDITURES (2) I.D. Number		
3) Cover Perio	d $\frac{09}{100}$ / $\frac{01}{100}$ / $\frac{15}{100}$ through $\frac{10}{1000}$	/ 02 / 15	4) Page	of _	
(5) Date	(7) Full Name	(8) Purpose	(9)	(10)	(11)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
09/11/2015	City of Miami Beach 1700 Convention Center Drive, Miami Beach, FL 33139	Application Fee	CAN		1,020.00
/ /					
/ /					
/ /					
/ /					
/ /					
/ /					
_/ /					

**DS-DE 14 (Rev. 11/13)** 

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Page 3 of 3